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CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

(LAST)

STATEMENT OF ECONOMIC INTERESTS
PRACTICES COCOVERDRAGE

Date Received FEB 2/9 2012

Please type or print in ink.

NAME OF FILER

2012 FFR 29 PM

(MIDDLE)

BY

-	EUER MICH	AEL NELSON
1.	Office, Agency, or Court	-
	Agency Name	
	CALIFORNIA STATE ASSEMBLY	
	Division, Board, Department, District, if applicable	Your Position
		ASSEMBLY MEMBER
	▶ If filing for multiple positions, list below or on an attachment.	
	Agency:	Position:
2.	Jurisdiction of Office (Check at least one box)	
	State ■ Control of the	☐ Judge or Court Commissioner (Statewide Jurisdiction)
	Multi-County	County of
	☐ City of	Other
3.	Type of Statement (Check at least one box)	
	Annual: The period covered is January 1, 2011, through December 31, 2011.	Leaving Office: Date Left//(Check one)
	The period covered is/, through December 31, 2011.	The period covered is January 1, 2011, through the date of leaving office.
	Assuming Office: Date assumed/	The period covered is/, through the date of leaving office.
	Candidate: Election Year Office sought, if di	Terent than Part 1:
4.	Schedule Summary	
	Check applicable schedules or "None." ► Tota	I number of pages including this cover page:
		Schedule C - Income, Loans, & Business Positions - schedule attached
		Schedule D - Income – Gifts – schedule attached
	Schedule B - Real Property schedule attached	Schedule E - Income – Gifts – Travel Payments – schedule attached
	-or-	
	None - No reportable interes	ests on any schedule
J		
	herein and in any attached schedules is true and complete. I acknowledge	this is
	I certify under penalty of perjury under the laws of the State of Californ	nia that
	Date Signed 2/18/12 s	ignatu

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
MICHAEL FEUER

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Coca Cola Company	Proctor & Gamble Company
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Soft drinks, food	Home products
FAIR MARKET VALUE	FAIR MARKET VALUE
※ \$2,000 - \$10,000	\$2,000 - \$10,000 X \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock	Stock Other (Describe)
(Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	(Describe) Partnership (Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
<u>, , , 11 _ , , 11 </u>	<u>, , 11 , 11 </u>
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	➤ NAME OF BUSINESS ENTITY
Sara Lee Corp.	Gap, Inc.
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Food products	Clothing
FAIR MARKET VALUE	FAIR MARKET VALUE
X \$2,000 - \$10,000	※ \$2,000 - \$10,000 □ \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other	Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
O micenie Necelved of \$500 of Micre (Nepoli of Schedule cy	O modifie (Vecessed of 4500 of more (Nebolt of contents of
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY Newell Rubbermaid	► NAME OF BUSINESS ENTITY Amgen Inc.
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Home products	Pharmaceuticals
FAIR MARKET VALUE	FAIR MARKET VALUE
★ \$2,000 - \$10,000	\$2,000 - \$10,000 X \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other	Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499	
Character Continue of Second States on the Second S	Partnership O Income Received of \$0 - \$499
Income Received of \$500 or More (Report on Schedule C)	Partnership Come Received of \$0 - \$499
income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE:	
	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE:
IF APPLICABLE, LIST DATE:	O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE:

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
MICHAEL FEUER

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Walt Disney Co.	II IBM
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Entertainment	Computers, communications
FAIR MARKET VALUE	FAIR MARKET VALUE
	\$2,000 - \$10,000 X \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
, , 11 , , 11	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Allstate Corp.	Microsoft
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Insurance	Computers
FAIR MARKET VALUE	FAIR MARKET VALUE
★ \$2,000 - \$10,000	X \$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other	X Stock Other
(Describe) Partnership () Income Received of \$0 - \$499	(Describe) Partnership () Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
<u>, , , 11 </u>	<u> </u>
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Bank of America	Myland Laboratories, Inc.
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Banking	Pharmaceuticals
FAIR MARKET VALUE	FAIR MARKET VALUE
★ \$2,000 - \$10,000	
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other	X Stock Other
(Describe) Partnership () Income Received of \$0 - \$499	(Describe)
O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ / 11 / / 11	/ / 11 3 / 19 / 10 1
ACQUIRED DISPOSED	ACQUIRED DISPOSED
* 3/10/10 is date minor child became adult (asset	s held by child)

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
MICHAEL FEUER

► NAME OF BUSINESS ENTITY] ▶	NAME OF BUSINESS ENTITY		
Tim Warner, Inc.		11	Whole Foods		
GENERAL DESCRIPTION OF BUSIN	NESS ACTIVITY		GENERAL DESCRIPTION OF BUS	SINESS ACTIVITY	
Communications			food company		
FAIR MARKET VALUE]]	FAIR MARKET VALUE		
X \$2,000 - \$10,000	\$10,001 - \$100,000	11	\$2,000 - \$10,000 [10,001 - \$100,000	
\$100,001 - \$1,000,000 []	Over \$1,000,000		\$100,001 - \$1,000,000 [Over \$1,000,000	
NATURE OF INVESTMENT			NATURE OF INVESTMENT		
Stock Other	(Describe)	[]	Stock Other	(Describe)	
Partnership O Income Received	. ,	H	Partnership O Income Receiv	, ,	
	d of \$500 or More (Report on Schedule C)	Ш		ved of \$500 or More (Report	on Schedule C)
IF APPLICABLE, LIST DATE:			IF APPLICABLE, LIST DATE:		
<u>/ / 11</u> *3 / 1	9 / 10	Н	/ / 11 *9 /	<u>27 _/ 11 </u>	
ACQUIRED DISPO	DSED	11		SPOSED	
► NAME OF BUSINESS ENTITY		•	NAME OF BUSINESS ENTITY		
Yum! Brands, Inc.		Ш	Intel Corp.		
GENERAL DESCRIPTION OF BUSIN	NESS ACTIVITY		GENERAL DESCRIPTION OF BUS	SINESS ACTIVITY	
Food sales			Computers		
FAIR MARKET VALUE		Ш	FAIR MARKET VALUE		
X \$2,000 - \$10,000	\$10,001 - \$100,000		X \$2,000 - \$10,000	\$10,001 - \$100,000	
\$100,001 - \$1 ,000,000	Over \$1,000,000		\$100,001 - \$1,000,000	Over \$1,000,000	
NATURE OF INVESTMENT		Ш	NATURE OF INVESTMENT		
X Stock Other	(Describe)	11	X Stock Other	(Describe)	
Partnership O Income Received	, ,		Partnership O income Receiv	, ,	on Schedule C)
IF APPLICABLE, LIST DATE:			IF APPLICABLE, LIST DATE:		
	9 <u>/ 10</u>		*	<u>27 / 11 </u>	
		11		POSED	
		Ш_			
► NAME OF BUSINESS ENTITY Home Depot		*	NAME OF BUSINESS ENTITY		
GENERAL DESCRIPTION OF BUSIN	NESS ACTIVITY		GENERAL DESCRIPTION OF BUS	SINESS ACTIVITY	
Home improvement		Ш			
FAIR MARKET VALUE]]	EARD MADIZET VALUE		
\$2,000 - \$10,000	\$10,001 - \$100,000	Ш	FAIR MARKET VALUE \$2,000 - \$10,000	\$10,001 - \$100,000	
\$100,001 - \$1,000,000	Over \$1,000,000		\$100,001 - \$1,000,000	Over \$1,000,000	
MATURE OF INVESTMENT			MATURE OF MUSETIALITY		
NATURE OF INVESTMENT Stock Other			NATURE OF INVESTMENT Stock Other		
N Grock	(Describe)	Ш		(Describe)	
Partnership O Income Received O Income Received	of \$0 - \$499 of \$500 or More (Report on Schedule C)		Partnership O Income Receive O Income Receive	red of \$0 - \$499 red of \$500 or More (Report o	on Schedule C)
IF APPLICABLE, LIST DATE:	· · · · · · · · · · · · · · · · · · ·		IF APPLICABLE, LIST DATE:		
/ / 11 * 9 / 21	7 / 11	11	j j 11 j	/ 11	
ACQUIRED DISPO			ACQUIRED DIS	POSED	ate hol
* 24040 :- 4-4-	1	: I	1.4 . 1 . 1 . 1	しい 	ets held y child
Comments: 3/19/10 is date m	inor child became adult; 9/27/	11 is (ate second minor child be	ecame adult 🔑	4 conia

SCHEDULE D Income - Gifts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Michael Feuer

► NAME OF SOURCE	► NAME OF SOURCE
ORT America	LA Chamber of Commerce
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
6435 Wilshire Blvd. #305 LA, CA 90048	350 South Bixel Street LA, CA 90017
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
educational and advocacy organization	Professional organization
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
12 , 11 , 11 s 150 event ticket	2 / 10 / 11 s 20.08 cocktail reception
spresented certificates	2 , 10 , 11
	2 / 10 / 11 s 20.08 dessert
NAME OF SOURCE	▶ NAME OF SOURCE
Planned Parenthood of Los Angeles	Sherman Oaks Chamber of Commerce
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
400 West 30th Street, LA, CA 90007	14827 Ventura Blvd. #207 Sherman Oaks, CA
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Health services and advocacy organization	Professional organization
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
10 / 6 / 11 s 100 event ticket	1 / 28 / 11 _{\$} 65 event ticket
	/sgave speech
► NAME OF SOURCE	▶ NAME OF SOURCE
California Democratic Party	Association of Jewish Educators
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
1401 21st Street, Suite 200, Sacramento, CA 95811	8339 West 3rd Street, Los Angeles, CA 90048
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Political party	Professional organization
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
2 / 8 / 11 _{\$} 117.09 dinner	5 / 15 / 11 _{\$} 50 event ticket
	\$
Comments:	

SCHEDULE D Income – Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Michael Feuer

NAME OF SOURCE Beverly Hills Bar Assn	. WINE OF COURSE
Reverly Hills Bar Asen	► NAME OF SOURCE
Deveny fillis Dai Assit	Studio City Chamber Association
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
300 South Beverly Dr, Ste 201, Beverly Hills, CA	4024 Radford Avenue, Studio City, CA 91604
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Professional organization	Professional organization
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
02 / 02 / 11 s 195 event ticket	07 , 04 , 11 _{\$} 60 3 event tickets
	11 , 03 , 11 s 25 lunch (gave speech)
	\$
NAME OF SOURCE	► NAME OF SOURCE
Consumer Attorneys of California	California League of Conservation Voters
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
770 L Street, #950, Sacto, CA 95814	6310 San Vincente Blvd, LA, CA 90048
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Professional organization	Educational and advocacy organization
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
5 / 2 / 11 _{\$} 150 event ticket	12 / 01 / 11 _{\$} 75 event ticket
11 / 12 / 11 s event ticket	\$
	\$
NAME OF SOURCE	► NAME OF SOURCE
United Chambers of Commerce	Consumer Attorneys of Los Angeles
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
5121 Van Nuys Blvd, #208, Sherman Oaks, CA	800 W. 6th Street #700, LA, CA 90017
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Professional organization	Professional organization
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
10 / 25 / 11 s 400 2 event tickets	
	1 <u>, 22 , 11</u> _{\$} 150 dinner (received
	plaque at dinner)

SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Michael Feuer

- · You must mark either the gift or income box.
- Mark the 501(c)(3) box for a travel payment received from a nonprofit 501(c)(3) organization. These payments are not subject to the \$420 gift limit, but may result in a disqualifying conflict of interest.

▶ NAME OF SOURCE	► NAME OF SOURCE
City of Los Angeles	Administrative Office of the Courts
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
1400 K Street, Suite 208	455 Golden Gate Avenue
CITY AND STATE	CITY AND STATE
Sacramento, CA 95814	San Francisco, CA 94102-3688
BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)	BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
City Government	Judicial Branch- State Agency
DATE(S): 01,01,11 12,31,11 AMT: \$ 360.00	DATE(S): 04 / 29 / 11 O4 / 29 / 11 AMT: \$ 387.40
TYPE OF PAYMENT: (must check one) 🔀 Gift 🔲 Income	TYPE OF PAYMENT: (must check one) 🗵 Gift 🔲 Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
Parking and shuttle service at LAX Airport.	Transportation to meeting regarding implementation of
	AB 590, of which I was the author.
NAME OF SOURCE	► NAME OF SOURCE
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)	BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
DATE(S): / / ANT 6	DATE(S): / / AMT: S
DATE(S):/ AMT: \$	DATE(S):/ AMT: \$
TYPE OF PAYMENT: (must check one)	TYPE OF PAYMENT: (must check one) Gift Income
Made a Speech/Participated in a Panel	☐ Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
•	
Comments:	